SP 0 9 2004

 r_{i}^{i}

	/		1
Sheet?		of	

		7.					E)	1				Sheet	of .			
FORM PTO (REV. 7-60)	1449	T	18		<u></u>	3 PUX	ZU.S	DEPARTME	INT OF COMMERCE	ATTY. DOCKET NO.	SERIAL NO. 10/848, 817					
LIST OF PRIOR ART CITED BY APPLICANT										APPLICANT BACK of al						
(Use several sheets if necessary)							ets i	il necessar,	(ע	FILING DATE		GROUP 37	21			
									U.S. PATENT	DOCUMENTS						
EXAMINER		DO	CUI	MEN	IT K	NUME	ER	DATE		. NAME		SUBCLASS	FILIN IF APPE	IG DATE ROPRIATE		
NB	AA	6	1	6	9	9	78	8-01	SINDON	, G. RUSEPPE.	22	2 144.5	†			
My	AB	5	Z	6	2	09	78	6-98	MANZO	NE et al	72	2 135				
71/5	AC	5	3	8	8	7	१ऽ	2-95	LICHT-1	ELD	227	2 136				
219	AD	5	1	9	9	6	14	4-93	PALME	Retal	222	144.5				
JB.	AE	5	0	6	0	82	2 5	10-9/	PALME	Retal	222	2 136				
W	AF	4	2	7	ح	8:	23	6-81	CRE DI.	E JR.	222	136				
M	AG	2	7	7	4	36	;4	12-56	BROBE	7 C	22	2 136				
	AH															
	Al															
	۲٦															
	AK						\prod							<u>.</u>		
-				_					FOREIGH PATEN	IT DOCUMENTS						
		DOCUMENT NUMBER					ER	DATE	COUN	TRY	CLASS	SUBCLASS	TRANSL			
													YES	NO		
	AL	_	4	4	4	\bot	\coprod		<u> </u>							
	AM			1				i 	<u> </u>					<u> </u>		
						ОТН	ER	PRIOR ART	(Including Author,	Title, Date, Pertinent Pag	es, Etc.)					
1	AR	-				 ,										
		_											,			
						•										
	AS	7					<u> </u>	~~~~~~~~~~								
							****			DECEMBER /						
EXAMINER		4	4	_	12)	1	have		DATE CONSIDERED /2/4/69	4					
<u> </u>	LUM	<u>c/</u>	2				40	berg		12/9/0	<u> </u>			. 		
*EXAMINE	R: Ini	laiti	if re	afa:	ranc	ce Co	on s ic	dered, wheth	er or not citation is	in conformance with MPE at communication to applic	P 609; De	aw line through	h citation	if not		
			,		;=		•	,								

											<u> </u>		Sheet	<u> </u>	
FORM PTO	1449	U.S. DEPARTMENT OF COMMERCE ATTY. DOCKET NO. PATENT AND TRADEMARK OFFICE									ATTY. DOCKET NO.	SI	ERIAL NO.		-
LIST OF PRIOR ART CITED BY APPLICANT (Use several sheets if necessary)											PRLICANT BAVID BA	ACH et al			
		_								U.S. PATEN	T DOCUMENTS			 	
*EXAMINER INITIAL		DOCUMENT NUMBER DATE						R	DV.LE		NAME	CL ASS	SUBCLASS	FILIN	G I
	AA	6	2	6	9	9	7	ģ	8-01	SINDO	NI	222	147.5		
	AB	5	7	b	2	Ø		8	6-98	MANZ	ONE	222	13.5		
	-AC	5	3	8	8	7	2	5	2-95	LICHFIL	4	222	136		
	AD	5	0	6	O	8	2	5	10-91	PALM	ER	222	136		
	AE-	4	2	7	5	8	2	3	6-8/	CREDI	<u>B</u>	222	136		
	AF	2	7	7	4	3	6	4	12-56	BRORE	tt_	222	136		
	AG														_
	AH		П												
	Al								·						
	A.J														
	AK														
										FOREIGN PATI	ENT DOCUMENTS				
		DOCUMENT NUMBER				BE	R	DATE	co	UNTRY	CLASS	SUBCLASS	YES	^T	
	AL	·				П									
	AM								•	•					L
						01	THE	R	PRIOR ART	(Including Autho	e, Title, Date, Pertinent P	ages, Eic.)			
-	AR										,				
		\dashv				•				•					-
	AS	\dashv							· · · · · · · · · · · · · · · · · · ·				······································		
EXAMINER			4		-						DATE CONSIDERED				-

\$ ALL REFERENCES OF RECOND IN 9/9/04 PTO-1449 USCOMM-DC 80-1985

in conformance and not considered. Include copy of this form with next communication to applicant.